

## BOOK REVIEW

Jonathan Leach. (2015). Improving Mental Health through Social Support: Building Positive and Empowering Relationships. London: Jessica Kingsley Publishers. ISBN 978-1-84905-518-5.

Margot Lindsay RGN BA MPhil MCLIP PhD

Former Research Officer, London Centre for Dementia Care, University College London, London, UK

### Correspondence address

Dr. Margot Lindsay, Division of Psychiatry, Maple House, 149 Tottenham Court Road, London, W1T 7NF. E-mail: [rejumev@ucl.ac.uk](mailto:rejumev@ucl.ac.uk)

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## Introduction

Social support can enhance mental health for all, but it is necessary to pay particular attention to how that support might be targeted at those people who, through experiences of mental ill health or distress, have become socially isolated, excluded and vulnerable. Social support can co-exist with psychiatric and psychological treatments; indeed, it can be argued that it is an essential ingredient in any package of measures designed to tackle mental health problems. This book does not assume that social support is all that is needed to improve mental health, but it promotes the idea that mental wellbeing is enhanced by appropriate social support and that medical and psychological interventions alone are unlikely to sustain recovery from mental distress. Compared with previous eras, there are now many more conditions that could be considered to fall within the scope of the mental health professions. Attitudes may have moved on since the days of explaining madness as a sign of demonic possession, but issues of stigma and discrimination still figure as problems for people with mental health problems. The resulting isolation can only exacerbate any existing problems and act as an obstacle to recovery. Social support has many valuable features that can promote the wellbeing of vulnerable people and this tends to be situated in the natural settings of home, workplace and community, rather than in a clinical environment.

This book provides a very clear explanation of rediscovering social support provides and an excellent guide for anyone involved in supporting people who are mentally ill. It should be made available in educational establishments and voluntary sector organisations as well as all social welfare and healthcare organisations. The building of positive and empowering relationships needs to be based on clear foundations including: mutual respect, trust, being non-judgemental and a belief that both parties have something to bring to the relationship. The more equal is the status of the two people in a social relationship, the more likely it is to feel as if it is a

friendship. For mental health practitioners, there are professional boundaries and power imbalances, which mean that, although they can operate in a friendly manner, they cannot truly be 'friends' with the users of their services. For social supporters, the situation is less clear. At the informal end of the spectrum, much social support is provided by friends and family where the relationship is based on mutual liking or a sense of kinship obligation. At the more formal end, staff working in third-sector community projects, employment support schemes, social enterprises, *et cetera* are likely to have a more relaxed relationship with patients than would apply in a clinical setting, but still with certain boundaries in place. In the middle ground are people in roles such as peer supporters and volunteer befrienders who offer much of the support associated with friendship, but are doing so in a more structured way.

## Thesis - concepts of mental health and distress

As the book discusses, whenever mental health is mentioned, it is often, in fact, the opposite that is being referred to. For instance, by far the greatest proportion of resources allocated to 'mental health services' are devoted to helping to control the symptoms of mental ill health of individuals whose condition is considered serious enough to warrant professional services. By contrast, relatively little expenditure is allocated to promote the mental health of the general population or to analyse and address the social conditions that might cause mental distress. This is not to deny that mental health professionals try to improve quality of life for those who use their services, but rather to suggest that there is often a stronger policy focus on responding to things that go wrong in individuals' lives instead of considering what makes them go well. The recent expansion of interest in 'positive psychology', both in the academic literature and in the wider market for books on self-help and self-improvement, may seem to be

redressing the balance, but as yet it is not clear whether this will have any impact on the practice of mental health and social work services or on wider social policy.

This book demonstrates that ideas developed in the fields of sociology, social anthropology and social psychology can have practical relevance for the empowerment of people who have been disadvantaged as a result of having experienced mental health problems. Although such problems do have troubling personal impacts on thoughts, feelings, motivation and behaviour at times, there are also significant external barriers to recovery and participation in Society that require a social perspective on the situation. There are many parallels with the social model of disability, first developed by people with physical and sensory impairments, which points to the disabling effects of a society that fails to accommodate the diverse needs of those who do not match an idealised norm of health. Whatever role biological or psychological traits may or may not play, social factors such as inequalities, unemployment, poverty, poor housing, domestic violence, sexual abuse and discrimination are recognised as risk factors in triggering and maintaining mental distress.

The term 'patient' is very firmly tied to a medical framework and so does not relate to people who are not currently being treated by a health professional. Similarly, words such as 'lunatic' and 'mad', although now embraced by some people with mental health problems, are loaded with derogatory meaning for many people. In this book, the terms 'distress', 'disturbance' or 'problems' are used to refer to the experiences of people who are having difficulties with their mental health, while accepting that even this is less than ideal.

## The Theme - understanding social support

Social relationships, as the volume discusses, exist at many levels, ranging from a small, intimate inner circle of friends and family to a much larger and more impersonal outer circle of acquaintances. Whereas close relatives or friends offering support may act out of a sense of love or duty, others may do so because of the combination of their personal traits and characteristics with features of the social context within which help is required. If the factors that encourage people to act altruistically can be understood, this may provide some useful pointers for enabling social support. The nature of modern society challenges the formation and maintenance of social relationships, but makes them as important as ever, especially for people whose lives have been disrupted by mental health issues. 'Social support' is used in this book to refer to various forms of help encountered within the environments in which people live, work, study and play. Some aspects of social support, such as establishing a caring relationship, helping to give meaning to distress and attempting to promote change, may share features with formal psychological support. Social support differs in being less structured and more likely to occur in everyday contexts. Often informal in nature, social support arises out

of the network of friends, family and acquaintances, such as neighbours and work colleagues, surrounding an individual. Social support is important to both physical and mental health. Lack of social support is associated with social isolation and feelings of loneliness. Social support is important to both physical and mental health. Lack of social support is associated with social isolation and feelings of loneliness.

Feelings of loneliness have been associated with an increased risk of a wide range of cognitive and mental health problems. The absence of close, confiding relationships has been found to be a significant factor in predicting depression and anxiety. It would seem that social support can play an important part in everyday life, helping people to feel connected with each other, have a valued identity and be better able to deal with stressful conditions.

This book promotes the idea that psychological wellbeing is enhanced by appropriate social support and that medical and psychological interventions alone are unlikely to sustain recovery from mental distress. Social support has many valuable features that can promote the wellbeing of vulnerable people and this tends to be situated in the natural settings of home, workplace and community rather than in a clinical environment.

## How the book is organised

Chapter 1, "A friend in need: Rediscovering social support", begins by acknowledging that most people experience a degree of mental distress at some point, but only a relatively small proportion will seek professional help. This means that many individuals are likely to derive informal social support from friends and family. If such support is not available, or not sufficient for their needs, some will seek or be directed towards medical or psychotherapeutic services. Even so, with the exception of the relatively low number of people who are currently hospital inpatients, most mental health patients will spend the majority of their time in the community. Whether or not that community has a positive influence on their mental health will depend on a number of factors, including the amount of social support that is available. In turn, the support offered by members of a community will be influenced by how they view 'mental health' and 'mental distress' and whether or not they feel they can offer meaningful and effective help. In these terms, mental health is not simply about feeling happy or sad. A person could be manically happy whilst behaving in a highly extravagant and risky fashion with little regard for others. If this continues for a lengthy period it could be difficult to argue that it is a healthy situation. Conversely, there are events, such as bereavement, job loss and relationship breakdown, where at least in the short term, sadness is an appropriate and healthy response. So, rather than being happy all the time, mental health is more about having some control over the direction of one's feelings, thoughts and actions, even though this will be disrupted from time to time by various challenges.

Chapter 2, “Social Aspects of Mental Health and Distress”, reviews those very aspects, particularly the stigmatising practice of a person becoming labelled as mentally ill. People affected by mental distress are particularly likely to experience isolation and loneliness. When forming social relationships, there is a tendency for individuals to seek out others with whom they feel they have things in common and to be wary of those who appear to be different. By separating out mental distress, mental disorder and mental health as distinct concepts, it is possible to explore different aspects of human experience. The use of the concept of ‘mental disorder’ has been criticised for placing certain people in a separate category rather than viewing them as part of a continuum, but without a formal diagnosis it would be difficult to access specialised professional support. Unfortunately, being classed as ‘mentally disordered’ does still lead to having a stigmatised identity in many sections of Society, which in turn can increase the risk of becoming socially excluded and economically disadvantaged.

Chapter 3 of the volume, entitled “Understanding Social Support”, explains the relationship between social support and health outcomes. A range of studies show that being part of a socially supportive network is not only good for mental health, but that there are physical health benefits too. There is evidence of the negative effects of loneliness, which can lead to depression, anxiety, decline in cognitive ability and a lack of adequate sleep. By contrast to the effects of loneliness, social support has a positive effect on physical and mental health. The positive effects of social support for both mental and physical health are such that help with developing social relationships is increasingly being recommended as a health intervention.

Chapter 4, “Close Up and Personal”, emphasises the importance of supportive relationships. Contact with friends, neighbours, colleagues and family can be very important for mental wellbeing, but at times of emotional crisis and on-going disruption of everyday life it can be difficult for those concerned to know how to act for the best. If someone experiences prolonged mental distress, the nature of their relationships with family members, friends and others is likely to change; their bonds may be either strengthened or weakened by the need for support and it is likely that there will be a rebalancing of relationships. In some cases, a relative or a friend will take on the role of ‘carer’. However, other and, sometimes less close, relationships may also play a role in maintaining wellbeing. This chapter builds on the previous discussion of social support for mental health, with a particular emphasis on the role of personal relationships. This focus has been chosen because close, confiding relationships are important to both reducing the risk of experiencing mental health problems and promoting recovery from them. Although largely focused on the role of friends and family, many of the ideas presented in this chapter are also applicable to the relationships found between colleagues in the workplace or between students and staff in educational settings.

Chapter 5 of the volume, entitled “Education Matters”, explains how support can be provided in schools, colleges

and universities. Engagement with education offers exciting opportunities to learn new things, to develop and mature as a person, to meet like-minded people and generally to acquire the skills, knowledge and attributes that will improve an individual’s chances of having a good life. Inevitably, some aspects of each person’s potential will be measured and labelled according to their achievement of qualifications. Thus, time spent in education can lead to experiences of inspiration, excitement, pressure, stress, exuberance and disappointment. While in education, students are subject to the same challenges in life as other people, plus the demands of learning new things and being assessed through coursework and examinations. If these challenges are not coped with, they can have a negative impact on a student’s academic achievement. In turn, academic failure can have a negative impact on the individual’s future life, including feelings of low self-esteem and the likelihood of diminished career prospects. If social support can play a role in supporting educational achievement and personal development, it could then also have a positive impact on present and future mental wellbeing. As the main focus of this book is adult mental health, most attention is paid in this chapter to further and higher education. However, as experiences at school can influence later life, the chapter begins with a brief consideration of mental health and social support within schools.

Chapter 6, “Working it Out: Support in the Workplace”, identifies social support as a key factor in improving the employment success of mental health patients. In addition to making work more pleasant, good relationships with co-workers will help the individual learn how to do the job efficiently and enable them to access support when difficulties are encountered or when the task involved requires input from colleagues. Support within the workplace is better when it is ‘natural support’, rather than someone external coming in and marking the person out as different. The role of the employment support worker or job coach can be facilitative, but should not be too obvious in the workplace. As the volume indicates, research has shown that developing social supports at work had a positive impact on job retention and that natural supports were more effective than paid support. Respondents to the Open University UK Survey reported that returning to work, having an understanding manager and colleagues and being made to feel welcome and valued, helped the employee. The role of emotional support in securing and keeping a job is of considerable importance as it builds self-confidence, sustains motivation and maintains a focus on employment. Within the workplace, natural supports can help with integration, problem solving, stress reduction and the learning of new skills.

Chapter 7 of the volume, entitled “The Bigger Picture: Communities, Social Networks and Social Support”, explains that individuals who are diagnosed and receive psychiatric treatment can become vulnerable and dependent. It has also been found that social work can lead to a narrowing of focus onto the individual and their problems, rather than in a broader approach that takes social context into account. As the book makes clear, there

needs to be a greater focus on developing that community's capacity to be accepting and supportive. Social support can play a key role in enabling anyone affected by mental health problems to use and benefit from social networks and social capital. Social support has a number of aspects: friendship, emotional support, constructing meaning, practical advice and material assistance, all of which can help in accessing social networks in the wider community. Social support may be the means by which individuals develop their capabilities, while social capital indicates the collective strength of a network of individuals.

Chapter 8, "Making it happen", looks at ways of working at both the individual and the community level to enhance social support for mental health. It explains the changing social policy in the UK. Recent policy documents for mental health have included concerns about social exclusion, employment, housing, discrimination and stigma and have stated that stronger social relationships should be an outcome of new, decentralised ways of providing mental health services. Personalisation of health and social care has become a key policy focus in the UK. Many people with experience of mental health problems report feelings of isolation and loneliness and research suggests that they tend to have smaller and more limited social networks than other people. So who could be involved in enabling greater access to social support and what sort of actions might help? This chapter looks at some possibilities for engagement by health and social care practitioners and others concerned with the social issues faced by people who experience mental health problems.

Chapter 9 of the book addresses the overall "Conclusions". Social support seems to be fundamental to human life; most of our basic and higher needs can only be met through the give and take of collaboration with other people. Evolutionary theorists suggest that our brains are larger than those of other animals because of the need to communicate with others in the complex ways that enable highly developed social organisation and the maintenance of personal relationships. Our very survival as a species has been dependent on our ability to communicate and co-operate with other human beings. So the suggestion that social support should be available to people affected by mental health problems is not to offer charity, but rather to extend the opportunities that most of the population benefit from in their daily lives. In this way, social support fits very well with approaches to mental health that focus on facilitating recovery and tackling social exclusion.

## Other key areas of discussion

The voices of people experiencing mental health problems is very clear from the interviews which were conducted by respondents to research conducted by the Open University, UK. The extracts quoted in this book speak more readily to readers than long theoretical expositions of the benefits of different approaches to therapeutic support. In the discussion of friendship, Jonathan Leach says that: "As well as being pleasurable in itself, friendship also seems to

be helpful in providing some form of distraction when the time is right, which can help people break out of cycles of depressed or anxious thoughts". He then refers to a respondent who explained that her friends who were there to talk, to make her cups of tea, to share their experiences or just take her mind off things with a silly movie and lots of cake.

Friendship plays a key role in affirming a person's identity; friendships are often chosen and nurtured because they help each party to maintain a similar world view and to reinforce their self-images. Friendships also seem to develop between people with a similar economic and social status and therefore hierarchies tend to be avoided in close relationships. It may be due to this tendency for friendships to be formed and maintained on the basis of equality of status that some mental health patients report changes in their friendship networks. One respondent explained that some friends were less than welcoming to her. But since being involved with services and meeting like-minded people, she had made a number of new friends who provided enormous support and were able to empathise with her.

Emotional support, as part of informal social support, consists largely of listening, showing empathy and concern and perhaps trying to lift the person's mood. Coping strategies include acceptance by others which could also act as a stepping stone to self-acceptance by the recipient. When acceptance by others was accompanied by a sense that they also had insight into the person's situation, this was seen as particularly effective. Contact with others who have shared similar experiences and who can then empathise with them is certainly valued by some service users. Respondents wondered where they would be without my wonderful friends that they had made through illness. As one person explained that sharing his experiences with other patients helped him to realise he was not alone in the way he felt.

In discussion of relationships in caring and mental health, partners are not always sympathetic during periods of distress which can result in distancing and dismissive behaviour. Placing responsibility onto the distressed individual for their problems often leads to making critical comments, which can have a negative impact on the relationship and diminishes the chances of recovery. Family and friends can become frustrated with the mentally ill person as they find his or her mood getting worse and assume the person is "putting it on" or "being lazy". In one case discussed within the volume the person clearly felt that he or she was held back by the attitudes and behaviour of precisely those in close contact who might be expected to be the most supportive in times of trouble. It has been suggested that how family members and other informal carers appraise the situation can have a significant impact on the mental wellbeing of the patient. Despite the reported problems of informal carers and professionals working together, social support would seem to be an essential element in any context where social exclusion and isolation may result from the experience of mental health issues.

Social support seems to be a key factor in improving the employment success of mental health patients. In

addition to making work more pleasant, good relationships with co-workers will help the individual learn how to do the job efficiently and enable them to access support when difficulties are encountered or when the task involved requires input from colleagues. Support within the workplace is better when it is 'natural support' rather than someone external coming in and marking the person out as different. Research has shown that developing social supports at work had a positive impact on job retention and that natural supports were more effective than paid support. A respondent to the Open University, UK research already cited valued this type of support because of having an understanding manager and colleagues made him feel welcome and valued. A person who provides a type of formal social support, helps their patient's efforts in choosing, getting and keeping a job in open employment.

## Conclusion

People affected by mental distress are particularly likely to experience isolation and loneliness. When forming social relationships, there is a tendency for individuals to seek out others with whom they feel they have things in common and to be wary of those who appear to be different. By separating out mental distress, mental disorder and mental health as distinct concepts, it is possible to explore different aspects of human experience. The use of the concept of 'mental disorder' has been criticised for placing certain people in a separate category rather than viewing them as part of a continuum, but without a formal diagnosis it would be difficult to access specialised professional support. Unfortunately, being classed as 'mentally disordered' does still lead to having a stigmatised identity in many sections of society, which in turn can increase the risk of becoming socially excluded and economically disadvantaged. At the level of interpersonal relationships, mental distress and disturbance could be viewed as a clash of realities between those who feel depressed or anxious, hear voices or have seemingly irrational beliefs and those who do not.

In conclusion, we hear, in this book, the voices of mentally ill respondents supported by authoritative research findings creating a very accessible text which avoids pompous theorising, communicating very clearly in a highly readable style. Department managers could save themselves endless HR meetings about "difficult" staff by using this book in daily practice. accordingly, the book is highly recommended.

## Conflicts of Interest

The author declares no conflicts of interest.